

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance ITY OF CAMBRIDGE
ELECTION COMMISSION

File	with:	
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le with: ity or Town Clerk or Election Commission Please print or type all inform	nation, except signatures.
Fill in dates: Reporting Period Beginning January Date Year 200	6 Ending December 31 2006
Type of report: (Check one) □8th day preceding preliminary □8th day preceding election	□30 day after election
Full Name of Candidate (if applicable) School Committee Office Sought and District 65 Eust's 5+ 5 (ambidge MA 0)140 Residential Address (617) 491-1809	Friends of Luc Schuster Committee Name Max McMahon Name of Committee Treasurer Eustis St. L Cambridge MH 02140 Committee Mailing Address 617 491-1809
Tel. No. (optional)	Tel. No. (optional)
Line 2: Total receipts this period (pa Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period Line 5: Ending balance (line 3 minus line Line 6: Total in-kind contributions this Line 7: Total (all) outstanding liabilities Line 8: Name of bank(s) used	\$\\\ \dots \\ \dots \dots \\ \dots \dots \\ \dot
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the finance activity, including all contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of this Signed under the penaltie May May Treasurer's signature (in ink)	nts, in-kind contributions and liabilities for this reporting period and represents the committee in accordance with the requirements of M.G.L. c. 55.
FOR CANDIDATE FILINGS ON	LY: (CANDIDATE MUST SIGN BELOW)
Affidavit of Candidate: (check 1 box only) Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the finance activity, of all persons acting under the authority or on behalf of this commit contributions, incurred any liabilities nor made any expenditures on my behalf during Candidate without Committee OR Candidate with independent activity filling I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements	tee in accordance with the requirements of M.G.L. c. 55. I have not received any this reporting period. separate report best of my knowledge and belief, a true and complete statement of all campaign

campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury:

Candidate signature (in ink)

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amo	ount	Occupation & Employer (for contributions of \$200 or more)
17/97/04	kathryn bately 81 B. Cushing St. Cambridge,My 02138 Day keyser	100	00	
12/22/06	Joe fastiard Jr.	100	60	
17/17/06	2A Cocust Come Watertown MA 01472	(00	00	1750
17/72/06			60	
M/72/06	Mark schuster	2.2	00	Professor, MIT
17/72/06	Charlotte Harrison 141 Oxford St. Cambridge MA 02/40		80	Ethicist, NAGH Children's 1tospital Boston
12/29/01	James + Virginia Wallace 141 Oxford St. Cambridge MA 03140	100	60	
	24 Mg			
Line 9:	Total receipts in excess of \$50 (or listed above)	1300	DD	
Line 10:	Total receipts \$50 and under* (not listed above)	520	00	
Line 11:	TOTAL RECEIPTS IN THE PERIOD	1820	00	Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

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SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Am	ount
17 12/06	USPS Central square	770 Mass AVC Cambilde, MA OJ139	Stamps	78	oc
3	Production and the second seco				
					The second secon
			·		
					1
		Line 12:	Expenditures over \$50	78	00
I	Enter on page 1, line 4		Expenditures \$50 and under* TOTAL EXPENDITURES	109	40

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		Line 15:	In-kind over \$50	
		Line 16:	In-kind \$50 and under	
	Enter on page 1, line 6	Line 17:	Total In-kind	

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address Purpose	Amount
	Enter on page 1, line 7	Line 18: OUTSTANDING LIABILITIES (ALL)	100

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

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Schedule E Municipal Form Disclosure of Assets Statement Office of Campaign and Political Finance

CITY OF CAMBRIDGE ELECTION COMMISSION

2007 JAN 24 P 12: 36

onetic serie			2007 0777 2	
n: City or Town Clerk or Election Commissi	On .		CPF ID#	42167106
This form should be filed by	all candidates	and committees with each	year end and each diss	solution report
nittee Name: Friends	of Lu	- 1 .	Date of re	port:_1/24/07
All can	didates and c	ommittees must fill in Pa	rt A <u>or</u> Part B.	eport: 1/24/07
) :				
assets* were acquired or dispo	sed of by this	candidate/committee duri	ng the period covered	by this statement.
B:				
acquired: List all assets acquired, list all assets.	ired since the	committee last filed this	statement. If this is the	ne first Schedule E you
Asset year, model or other identifying ation, if applicable.	Date Acquired	Present Location	Manner Acquired	Cost/Value
	·			
		<u></u>		L
disposed of: List all assets sol	d, traded or tra	ansferred during the repor	ting period covered by	this statement.
Asset : year, model or other identifying	Date Acquired	Disposition to: Name and Address	Date and Manner of Disposition	Disposition Value Attach statement of how
uion, if applicable.				value is determined.
				Contracting the second
ured by a political committee mu	at be used for the	political purpose for which th	e committee is preanized as	nd must remain the propert
rumittee. Assets may be disposed of	f at any time, but	must be disposed of prior to d	issolution.	^
is defined as any one item that has e of \$1,000 or more at the time of	a useful life of a	more than one year, would be	depreciable in a normal but	siness environment, and ha
nder the penalties of perjury:	•	Sign	ned under the penalties of p	eritury.
20~1/2	4/	3.5	11 . Illahi	1/. / -
m [] 4 11/	1107	-	My MML	1/24/07
lute signature Date		Tre	asurge signature	Date
additional sheets, if necessary,	to disclose all	assets acquired or dispos	ed of in a reporting per	
				9/9